



County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES
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March 22, 2005

To: Supervisor Gloria Molina, Chair
Supervisor Michael D. Antonovich, Chair Pro Tem
Supervisor Yvonne B. Burke
Supervisor Zev Yaroslavsky
Supervisor Don Knabe

From: David Sanders, Ph. D. 
Director — Department of Children and Family Services


Marvin J. Southard, D.S.W.
Director — Department of Mental Health

MARCH 15, 2005 BOARD AGENDA ITEM #2 — MOTION BY SUPERVISOR ZEV YAROSLAVSKY re: HOLLYGROVE CHILDREN AND FAMILY SERVICES

On March 15, 2005, the Board instructed the Departments of Children and Family Services (DCFS) and Mental Health (DMH) to report back in seven days on the actions necessary to support and assist Hollygrove Children and Family Services' (Hollygrove) transition from residential care of young children to services that better meet DCFS' goals of reunification and permanency; and the actions necessary to successfully transition young children from Hollygrove's residential care either back to their homes or to more family-like settings.

As discussed at your Board meeting of March 15, 2005, many residential facilities are feeling the crunch of decreasing referrals. This has been attributed to the Department's increasing focus on reunification efforts as well as the Department's practice to refer certain age groups to small foster homes rather than group homes. As also noted in your discussion, the transition that is taking place in the type and level of care needed is dramatic, and the focus needs to be on what is best for children, and not just on sustaining residential services.

During recent months, the Departments of Children and Family Services and Mental Health have had several meetings with Hollygrove to discuss the development and transition from being primarily a residential program to one that provides a variety of alternative services and programs to assist with the care of children toward the achievement of reunification and permanency. In order to continue to address the needs of children and to identify ways in which Hollygrove can support the department in the achievement of its outcomes, the following strategies are under development:

- As a temporary financial stop-gap measure, Hollygrove will convert approximately 20 beds to shelter care beds, available 24/7, for adolescents with high-level needs. The age and gender of the children will be determined shortly. These beds, paid at the RCL 12 rate and related mental health billable services, may be utilized for temporary shelter (up to 14 days); or for children requiring assessment services, stabilization services and transition/permanency planning with a maximum stay of 30 days. This effort will require Hollygrove, with assistance from DCFS, to work with Community Care Licensing (CCL) to increase the population age limit and to support the necessary program changes. Hollygrove will continue to operate its RCL 12 residential treatment center for children ages 6 to 13 as it launches its shelter program. In addition, both DCFS and Hollygrove agree that the shelter program can be discontinued with 30 days' notice.
- DMH is committed to supporting Hollygrove's programs that serve foster children, including increasing the funding for EPSDT mental health services. If this increase is greater than 20 percent of Hollygrove's existing contract, DMH will request Board approval for this increase in the maximum amount of the current contract.
- As with many agencies, there are children currently in treatment at Hollygrove who could return home or move to a less restrictive, more family-like setting if there were intensive in-home therapeutic services to support their transition. DCFS is committed to working with Hollygrove in developing this pilot to determine the appropriate costs for these services, including a viable transition process, and to explore available funding streams to fund these services.
- Hollygrove has begun its pilot program to support D-rated children and their caregivers; this includes in-home individual therapy, in-home family/group therapy, parent support, Therapeutic Behavioral Services (TBS), respite care crisis management, psychotropic medical evaluation, 24/7 telephone access and case management services to link families and children with other providers or agencies to meet their needs. DCFS and DMH will continue to work closely with Hollygrove as it expands these services to D-rated children and foster parents and as it develops a similar program for relative caregivers.

I thank the Board for balancing its support for transitioning children from residential care to services that better meet DCFS' goals of reunification and permanency with its support for the changes necessary to address the fiscal challenges being experienced by group homes as a result of reduced referrals. On March 29, 2005, pursuant to an amending motion by Supervisor Don Knabe, DCFS will provide a written report to the Board regarding the current group home rate setting system set up by the State to fund these agencies. In addition, on June 15, 2005, pursuant to amending motions by Supervisors Yvonne B. Burke and Don Knabe, DCFS will provide a written report to the Board on the recommendations and findings of the "Children's Group Home Workgroup" as well as on proposals to modify the group home rate setting structure, including potential legislative changes, which would positively impact this situation.

For any questions, please feel free to contact me at (213) 351-5600 or your staff may contact Helen Berberian, Board Relations Manager, at (213) 351-5530.

DS:JS:hf

C: Board Executive Officer
Chief Administrative Office
County Counsel